

# MORROW COUNTY

Love life. Live rural.



## Coronavirus Crisis Assistance to Morrow County Businesses and Organizations Through the Morrow County Development Office March 27, 2020

*With today's passage of the \$2 Trillion Stimulus Law further guidance will be provided in the coming days about changes to the SBA loan program. Early indications from Congress are that some expenditures through this grant, such as for current payroll, may be treated as a "forgiveness" grant. Those details are not yet available. This document will be updated as more information is provided. Interested businesses are encouraged to start the process of applying for this loan. The average approval time currently is about three weeks. Applying for the loan does NOT obligate applicants to accept offered loans. The SBA has indicated that the number one cause of rejected loan applications is due to incomplete submissions. This packet includes ALL of the currently required SBA and IRS forms required to apply for this loan program. Please completely fill out these forms and scan them for uploading prior to starting your online application. Please call the Morrow County Development office at (419) 947-7535 for questions or assistance in applying for a SBA Disaster Loan.*

### **Small Business Administration Disaster Loan Program Overview**

Provides up to **\$2 million** in emergency assistance for small businesses impacted by shutdowns caused by the Coronavirus pandemic.

Loan terms are for **30 years at 3.75% for small businesses** or 2.75% for Not For Profit Organizations.

#### Loan funds can be used for:

Fixed debt payments  
Payroll  
Accounts payable  
Other uses

#### Collateral:

No collateral needed for loans under \$25,000  
Lack of collateral does not automatically disqualify applications  
Real estate is preferred and a second or third place lien is possibly accepted

#### Suggested application tips:

Assemble all recommended forms and complete before starting online process. Those forms are attached to this packet. They need to be filled out and then scanned for uploading.

#### Required forms include:

SBA Form 5  
IRS Form 4506 T  
SBA Form 2202  
SBA Form 413  
SB Form 1368

#### Other documents that may be necessary include:

Personal Tax Returns  
Year-end financial statements  
Current Profit & Loss statement  
SBA Form 1368

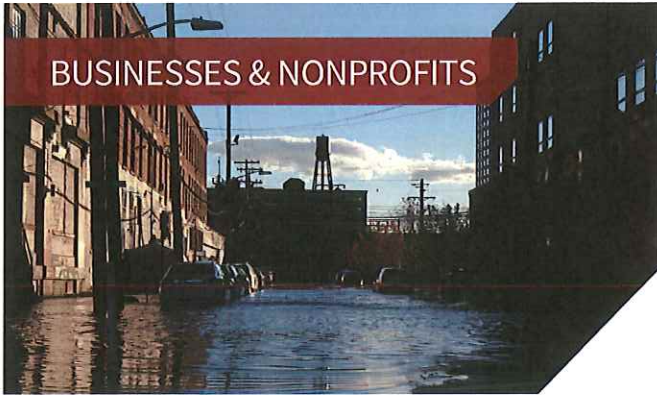
One more tip, when filling out the online application businesses need to check "economic injury" for the online form to work.

Please call the Morrow County Development Office for assistance at (419) 947-7535.



# SBA Disaster Assistance Loans

## BUSINESSES & NONPROFITS



### Business Disaster Loans — up to \$2 million\*

SBA disaster loans are available to businesses, regardless of size, and nonprofits including charitable organizations such as churches and private universities.

Borrow up to \$2 million to repair or replace damaged or destroyed real estate, machinery and equipment, inventory and other business assets. Loans may also be used for structural improvements such as adding a retaining wall or sump pump, clearing out overgrown landscaping, building a safe room or elevating the property to lessen the effect of future disasters.

## When Disaster Strikes

Even with the best preparedness planning, a disaster can affect your business. But rest assured, the U.S. Small Business Administration (SBA) offers two low-interest loans designed to help you get up and running again as quickly as possible.

### Economic Injury Disaster Loans — up to \$2 million\*

These loans are for small businesses, agricultural cooperatives, aquaculture enterprises and nonprofits affected by disaster to help meet working capital needs or normal business operating expenses through the recovery period. Businesses are eligible for these loans regardless of whether or not they have suffered property damage.

*\*The maximum loan for any combination of property damage and/or economic injury is \$2 million.*

## How to Get Started

1



### Apply for an SBA Loan

[disasterloan.sba.gov/ela](https://disasterloan.sba.gov/ela)

Find Disaster Recovery Centers at [sba.gov/disaster](https://sba.gov/disaster).

(800) 659-2955 or TTY (800) 887-8339 to request an application.

2

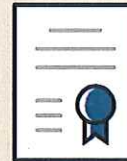


### The Application Process

After an initial credit check, an SBA loss verifier estimates the total cost to repair or replace your damaged property.

An SBA loan officer reviews applications and guides applicants through the process.

3



### Loan Decision

If approved, SBA contacts applicants to discuss the loan.

A case manager assists with closing the loan and scheduling disbursements.



U.S. Small Business  
Administration

## DISASTER ASSISTANCE

Businesses ■ Homeowners ■ Renters ■ Nonprofits



## SBA's Economic Injury Disaster Loan Basics

What businesses are eligible to apply?

- Small businesses
- small agricultural cooperatives
- small aquaculture businesses
- most private non-profit organizations

Must be:

- directly affected by the disaster
- located in the disaster area

## SBA's Economic Injury Disaster Loan Terms

How much can I borrow?

Up to \$2 million.

3.75% for small business

2.75% for NFPs

How can I use the loan funds?

- Fixed debt payments
- payroll
- accounts payable
- other bills



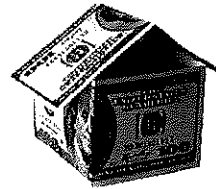
U.S. Small Business - Office of Disaster Assistance - Field Operations Center - East

3

## Economic Injury Disaster Loan Terms

What are the collateral requirements?

- Real estate preferred on loans over \$25,000.
- Lack of collateral is not a reason for decline.



4

## Basic Filing Requirements

- Application (Form 5 or 5C)
- IRS 4506T for the applicant, principals and affiliates.
- Business Federal Income Tax Return
- Schedule of Liabilities (SBA Form 2202).
- Personal Financial Statement (SBA Form 413).



5<sub>6</sub>

## Additional Filing Requirements

Other information that may be requested:

- Personal Tax Returns for all principals.
- Year-end financial statements
- Interim (Current) P&L
- SBA Form 1368 (Monthly Sales)



U.S. Small Business - Office of Disaster Assistance - Field Operations Center - East

6<sub>6</sub>

## Ineligible Entities

What are some of the businesses that are ineligible for an Economic Injury Disaster Loan?

- Farms
- Religious Organizations
- Gambling Concerns
- Casinos & Racetracks



U.S. Small Business-Office of Disaster Assistance-Field Operations Center- East

7



## How to Apply

SBA's Customer Service Representatives are ready to serve.

- <https://disasterloan.sba.gov/ela>.
- Paper loan applications can be downloaded from [www.sba.gov/disaster](http://www.sba.gov/disaster). Completed applications should be mailed to: U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155. (Not recommended.)
- SBA's Customer Service Center at 800-659-2955 can provide applications. [disastercustomerservice@sba.gov](mailto:disastercustomerservice@sba.gov).



U.S. Small Business-Office of Disaster Assistance-Field Operations Center- East

8

## Submit a COMPLETE Application As Soon As Possible

MISSING INFORMATION IS THE BIGGEST CAUSE OF DELAY



9

## Disaster Loan Application Portal (DLAP)

DOUBLE-CLICK ON THE LINK TO ACCESS  
THE SITE

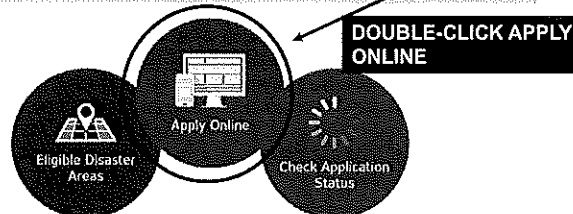
<https://disasterloan.sba.gov/ela/>



Home Info Connections **Apply Online**

### Disaster Loan Assistance

Federal Disaster Loans for Businesses, Private Nonprofits, Homeowners, and Renters



10





## **Instructions for Completing the “Estimated Disaster Economic Injury Worksheet for Business”**

### **Item 1**

Line 1

Enter the property owner's name. If different than the business name, also enter the business name.

Line 2

If more than one owner, enter the co-owner's name or names

Line 3

Enter the street address of the business location.

Line 4

Enter the mailing address of the business

Line 5

Enter the telephone numbers of the business and owner's home.

---

### **Item 2**

Line 3

Enter the date that the economic impact to your business due to the disaster started or is estimated to start. Economic impact can be defined as a decrease in revenues from normal levels resulting in decreased gross profit. Then enter the date that revenues and gross profits returned to normal levels. This date may be in the future and will require an estimate.

Line 4

Enter the business' revenues between the two dates you showed

Line 4

Enter the business' revenues between the same two dates of the previous year.

---

### **Item 3**

Line 1

If you have business interruption insurance to cover losses due to the disaster, enter the amount received or anticipated. Enter zero if none.

---

### **Item 4**

Line 1

Enter a brief narrative explaining how the disaster affected your business' revenues and operations

---

**Item 5**

Line 1

Enter the number of employees, including management and part-time employees, of the business prior to the date of the disaster.

Line 2

Enter the number of employees, including management and part-time employees, of the business after the end of the disaster. This may require an estimate.

---

**Item 6**

Line 2

Enter the estimated loss, in dollars, to the building occupied by the business, if owned by the business or an owner of the business..

Line 3

Enter the estimated loss, in dollars, to the contents of the business' building.

---

**Item 7**

Line 1

Enter the insurance recovery received or expected for disaster damage to the building and/or contents.

---

**Signature and Date**

Provide the signature of the business' owner or representative and enter the date the form was prepared.

Please Email Completed Forms to: james.laipply@development.ohio.gov  
If you have questions please call 614-466-6581

### ESTIMATED DISASTER ECONOMIC INJURY WORKSHEET FOR BUSINESSES

Accurate responses to the questions below will assist in evaluating a request for an economic injury disaster declaration from the U.S. Small Business Administration.

1. Name of Property Owner: \_\_\_\_\_  
Name of Property Owner: \_\_\_\_\_  
Business/Property Address: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Telephone Numbers: Business: \_\_\_\_\_ Home: \_\_\_\_\_

2. **Estimated Adverse Economic Impact**

Did the disaster economically impact your business? If so, when did the impact start and end?

\_\_\_\_\_ to \_\_\_\_\_  
(month/year) (month/year)

What were your business' revenues during that period? \$ \_\_\_\_\_

What were your business' revenues during the same period of the prior year? \$ \_\_\_\_\_

3. Amount of business interruption insurance received or anticipated, if any: \$ \_\_\_\_\_

4. Provide a brief explanation of what adverse economic effects the disaster had on your business:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. How many people did you employ **prior** to the disaster? \_\_\_\_\_

How many people did you employ **after** the disaster? \_\_\_\_\_

**If your business also suffered property damage, answer the following questions:**

6. Estimated dollar loss to:

Real property (building), if owned: \$ \_\_\_\_\_

Contents (machinery and equipment, furniture and fixtures,  
inventory, leasehold improvements, etc): \$ \_\_\_\_\_

7. Insurance recovery received or anticipated for **property** damages: \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Business Owner/Representative

\_\_\_\_\_  
Date



U.S. Small Business  
Administration

## U.S. SMALL BUSINESS ADMINISTRATION FACT SHEET – ECONOMIC INJURY DISASTER LOANS

### OHIO Declaration 16355

(Disaster: OH-00077)

Incident: **CORONAVIRUS (COVID-19)**

occurring: January 31, 2020 & continuing

*All counties within the State of Ohio; the contiguous Indiana counties of: Adams, Allen, DeKalb, Dearborn, Franklin, Jay, Randolph, Steuben, Union and Wayne; the contiguous Kentucky counties of: Boone, Boyd, Bracken, Campbell, Greenup, Kenton, Lewis, Mason and Pendleton; the contiguous Michigan counties of: Hillsdale, Lenawee and Monroe; the contiguous Pennsylvania counties of: Beaver, Crawford, Erie, Lawrence and Mercer; and the contiguous West Virginia counties of: Brooke, Cabell, Hancock, Jackson, Marshall, Mason, Ohio, Pleasants, Tyler, Wayne, Wetzel and Wood*

**Application Filing Deadline: December 21, 2020**

#### Disaster Loan Assistance Available:

Economic Injury Disaster Loans (EIDLs) – Working capital loans to help small businesses, small agricultural cooperatives, small businesses engaged in aquaculture, and most private, non-profit organizations of all sizes meet their ordinary and necessary financial obligations that cannot be met as a direct result of the disaster. These loans are intended to assist through the disaster recovery period.

#### Credit Requirements:

- Credit History – Applicants must have a credit history acceptable to SBA.
- Repayment – Applicants must show the ability to repay the loan.
- Collateral – Collateral is required for all EIDL loans over \$25,000. SBA takes real estate as collateral when it is available. SBA will not decline a loan for lack of collateral, but SBA will require the borrower to pledge collateral that is available.

#### Interest Rates:

The interest rate is determined by formulas set by law and is fixed for the life of the loan. The maximum interest rate for this program is 3.750 percent.

#### Loan Terms:

The law authorizes loan terms up to a maximum of 30 years. SBA will determine an appropriate installment payment based on the financial condition of each borrower, which in turn will determine the loan term.

#### Loan Amount Limit:

The law limits EIDLs to \$2,000,000 for alleviating economic injury caused by the disaster. The actual amount of each loan is limited to the economic injury determined by SBA, less business interruption insurance and other recoveries up to the administrative lending limit. SBA also considers potential contributions that are available from the business and/or its owner(s) or affiliates. If a business is a major source of employment, SBA has the authority to waive the \$2,000,000 statutory limit.

#### Loan Eligibility Restrictions:

Noncompliance – Applicants who have not complied with the terms of previous SBA loans may not be eligible. This includes borrowers who did not maintain required flood insurance and/or hazard insurance on previous SBA loans.

**Note:** Loan applicants should check with agencies / organizations administering any grant or other assistance program under this declaration to determine how an approval of SBA disaster loan might affect their eligibility.

#### Refinancing:

Economic injury disaster loans cannot be used to refinance long term debts.

#### Insurance Requirements:

To protect each borrower and the Agency, SBA may require you to obtain and maintain appropriate insurance. By law, borrowers whose damaged or collateral property is located in a special flood hazard area must purchase and maintain flood insurance. SBA requires that flood insurance coverage be the lesser of 1) the total of the disaster loan, 2) the insurable value of the property, or 3) the maximum insurance available.

Applicants may apply online, receive additional disaster assistance information and download applications at <https://disasterloan.sba.gov/ela>. Applicants may also call SBA's Customer Service Center at (800) 659-2955 or email [disastercustomerservice@sba.gov](mailto:disastercustomerservice@sba.gov) for more information on SBA disaster assistance. Individuals who are deaf or hard-of-hearing may call (800) 877-8339. Completed applications should be mailed to U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, TX 76155.

## **U. S. Small Business Administration DISASTER BUSINESS LOAN APPLICATION**

If you have questions about this application or problems providing the required information, please contact our Customer Service Center at 1-800-659-2955 or [disastercustomerservice@sba.gov](mailto:disastercustomerservice@sba.gov)

If more space is needed for any section of this application, please attach additional sheets.

SBA will contact you by phone or E-mail to discuss your loan request.

### **Filing Requirements**

#### **FOR ALL APPLICATIONS THE FOLLOWING ITEMS MUST BE SUBMITTED.**

- This application (SBA Form 5), completed and signed
- Tax Information Authorization (IRS Form 8821/4506-T), completed and signed by each applicant, each principal owning 20 percent or more of the applicant business, each general partner or managing member; and, for any owner who has a 50 percent or more ownership in an affiliate business. Affiliates include, but are not limited to, business parents, subsidiaries, and/or other businesses with common ownership or management
- Complete copies, including all schedules, of the most recent Federal income tax returns for the applicant business; an explanation if not available
- Personal Financial Statement (SBA Form 413) completed, signed, and dated by the applicant (if a sole proprietorship), each principal owning 20 percent or more of the applicant business, and each general partner or managing member
- Schedule of Liabilities listing all fixed debts (SBA Form 2202 may be used)

#### **ADDITIONAL REQUIREMENTS FOR MILITARY RESERVIST ECONOMIC INJURY (MREIDL);**

- A copy of the essential employee's notice of expected call-up to active duty, or official call-up orders, or release/discharge from active duty
- A written explanation and financial estimate of how the call-up of the essential employee has or will result in economic injury to your business, and the steps your business is taking to alleviate the economic injury

#### **ADDITIONAL INFORMATION MAY BE NECESSARY TO PROCESS YOUR APPLICATION. IF REQUESTED, PLEASE PROVIDE WITHIN 7 DAYS OF THE INFORMATION REQUEST;**

- Complete copy, including all schedules, of the most recent Federal income tax return for each principal owning 20 percent or more, each general partner or managing member, and each affiliate
- If the most recent Federal income tax return has not been filed, a year-end profit-and-loss statement and balance sheet for that tax year
- A current year-to-date profit-and-loss statement
- Additional Filing Requirements (SBA Form 1368) providing monthly sales figures

**NOTE: PLEASE READ, DETACH AND KEEP FOR YOUR RECORDS**  
**STATEMENTS REQUIRED BY LAWS AND EXECUTIVE ORDERS**

To comply with legislation passed by the Congress and Executive Orders issued by the President, Federal executive agencies, including the Small Business Administration (SBA), must notify you of certain information. You can find the regulations and policies implementing these laws and Executive Orders in Title 13, Code of Federal Regulations (CFR), Chapter 1, or our Standard Operating Procedures (SOPs). In order to provide the required notices, the following is a brief summary of the various laws and Executive Orders that affect SBA's Disaster Loan Programs.

**FREEDOM OF INFORMATION ACT (5 U.S.C. § 552)**

This law provides, with some exceptions, that we must make records or portions of records contained in our files available to persons requesting them. This generally includes aggregate statistical information on our disaster loan programs and other information such as names of borrowers (and their officers, directors, stockholders or partners), loan amounts at maturity, the collateral pledged, and the general purpose of loans. We do not routinely make available to third parties your proprietary data without first doing pre-notification, required by Executive Order 12600, or information that would cause competitive harm or constitute a clearly unwarranted invasion of personal privacy.

Send a request under this Act to the SBA office maintaining the records requested and identify it as a Freedom of Information Act (FOIA) request. The request must describe the specific records you want. For information about the FOIA, contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416, or by e-mail at [foia@sba.gov](mailto:foia@sba.gov).

**PRIVACY ACT (5 U.S.C. § 552a)**

Anyone can request to see or get copies of any personal information that we have in your file. Any personal information in your file that is retrieved by individual identifiers, such as name or social security number is protected by the Privacy Act, which means requests for information about you may be denied unless we have your written permission to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act. The Agreements and Certifications section of this form contains written permission for us to disclose the information resulting from this collection to state, local or private disaster relief services.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use for SBA's loan system of records is that when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature, SBA may refer it to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use of personal information is to assist in obtaining credit bureau reports, on the Disaster Loan Applicants and guarantors for purposes of originating, servicing, and liquidating Disaster loans. See, 69 F.R. 58598, 58617 (and as amended from time to time) for additional background and other routine uses.

Under the provisions of the Privacy Act, you are not required to provide social security numbers. (But see the information under Debt Collection Act below) We use social security numbers to distinguish between people with a similar or the same name for credit decisions and for debt collection purposes. Failure to provide this number may not affect any right, benefit or privilege to which you are entitled by law, but having the number makes it easier for us to more accurately identify to whom adverse credit information applies and to keep accurate loan records.

Note: Any person concerned with the collection, use and disclosure of information, under the Privacy Act may contact the Chief, FOI/PA Office, 409 3rd Street, SW, Suite 5900, Washington, DC 20416 or by e-mail at [foia@sba.gov](mailto:foia@sba.gov) for information about the Agency's procedures relating to the Privacy Act and the Freedom of Information Act.

**DEBT COLLECTION ACT OF 1982; DEFICIT REDUCTION ACT OF 1984; DEBT COLLECTION IMPROVEMENT ACT OF 1996 & other titles (31 U.S.C. 3701 et seq.)**

These laws require us to aggressively collect any delinquent loan payments and to require you to give your taxpayer identification number to us when you apply for a loan. If you receive a loan and do not make payments when they become due, we may take one or more of the following actions (this list may not be exhaustive):

- \*Report the delinquency to credit reporting bureaus.
- \*Offset your income tax refunds or other amounts due to you from the Federal Government.
- \*Refer the account to a private collection agency or other agency operating a debt collection center.
- \*Suspend or debar you from doing business with the Federal Government.
- \*Refer your loan to the Department of Justice.
- \*Foreclose on collateral or take other actions permitted in the loan instruments.
- \*Garnish wages.
- \*Sell the debt.
- \*Litigate or foreclose.



#### RIGHT TO FINANCIAL PRIVACY ACT OF 1978 (12 U.S.C. § 3401 et seq.)

This notifies you, as required by the Right to Financial Privacy Act of 1978 (Act), of our right to access financial records held by financial institutions that were or are doing business with you or your business. This includes financial institutions participating in loans or loan guaranties.

The law provides that we may access your financial records when considering or administering Government loan or loan guaranty assistance to you. We must give a financial institution a certificate of our compliance with the Act when we first request access to your financial records. No other certification is required for later access. Our access rights continue for the term of any approved loan or loan guaranty. We do not have to give you any additional notice of our access rights during the term of the loan or loan guaranty.

We may transfer to another Government authority any financial records included in a loan application or about an approved loan or loan guaranty as necessary to process, service, liquidate, or foreclose a loan or loan guaranty. We will not permit any transfer of your financial records to another Government authority except as required or permitted by law.

#### Paperwork Reduction Act (44 U.S.C. Chapter 35)

We are collecting the information on this form in order to make disaster loans available to qualified small businesses. The form is designed to collect the information necessary for us to make eligibility and credit decisions in order to fund or deny loan requests. We will also use the information collected on this form to produce summary reports for program and management analysis, as required by law.

PLEASE NOTE: The estimated burden for completing this form is 2 hours. Your responses to the requested information are required in order to obtain a benefit under SBA's Disaster Business Loan Programs. However, you are not required to respond to any collection of information unless it displays a currently valid OMB approval number. If you have any questions or comments concerning any aspects of this information collection, please contact the U.S. Small Business Administration Information Branch, 409 3rd St., SW, Washington, DC 20416 and Desk Officer for SBA, Office of Management and Budget, Office of Information and Regulatory Affairs, 725 17th St., NW, Washington, DC 20503. (3245-0017) **PLEASE DO NOT SEND FORMS TO OMB.**

#### Policy Concerning Representatives and Their Fees

When you apply for an SBA loan, you may use an attorney, accountant, engineer, appraiser or other representative to help prepare and present the application to us. You are not required to have representation. If an application is approved, you may need an attorney to help prepare closing documents.

There are no "authorized representatives" of SBA, other than our regular salaried employees. Payment of a fee or gratuity to our employees is illegal and will subject those involved to prosecution.

SBA Regulations prohibit representatives from proposing or charging any fee for services performed in connection with your loan unless we consider the services necessary and the amount reasonable. The Regulations also prohibit charging you any commitment, bonus, broker, commission, referral or similar fee. We will not approve the payment of any bonus, brokerage fee or commission. Also, we will not approve placement or finder's fees for using or trying to use influence in the SBA loan application process.

Fees to representatives must be reasonable for services provided in connection with the application or the closing and based upon the time and effort required, the qualifications of the representative, and the nature and extent of work performed. Representatives must execute a compensation agreement.

In the appropriate section of the application, you must state the names of everyone employed by you or on your behalf. You must also notify the SBA disaster office in writing of the names and fees of any representative you employ after you file your application.

If you have any questions concerning payment of fees or reasonableness of fees, contact the Field Office where you filed or will file your application.

#### Occupational Safety and Health Act (29 U.S.C. 3651 et seq.)

This legislation authorizes the Occupational Safety and Health Administration (OSHA) in the Department of Labor to require businesses to modify facilities and procedures to protect employees when appropriate. If your business does not do so, you may be penalized, forced to close or prevented from starting operations in a new facility. Because of this, we may require information from you to determine whether your business complies with OSHA regulations and may continue operating after the loan is approved or disbursed. You must certify to us that OSHA requirements applying to your business have been determined and that you are, to the best of your knowledge, in compliance.



# U. S. Small Business Administration DISASTER BUSINESS LOAN APPLICATION

OMB No. : 3245-0017  
Expiration: 01/31/2018

FOR SBA INTERNAL USE ONLY

Date Received \_\_\_\_\_ Location \_\_\_\_\_ By \_\_\_\_\_

Physical Declaration Number

Filing Deadline Date

Economic Injury Declaration Number

Filing Deadline Date

FEMA Registration Number   
(if known)

SBA Application Number

## 1. ARE YOU APPLYING FOR:

- ☐ **Physical Damage -- Indicate type of damage**
- ☐ Real Property ☐ Business Contents
- ☐ **Economic Injury (EIDL)**

☐ **Military Reservist EIDL (MREIDL)**

(complete the following)

\* Name of Essential Employee \_\_\_\_\_

\* Employee's Social Security Number \_\_\_\_\_

**PLEASE PROVIDE ALL INFORMATION OR DOCUMENTATION REQUESTED IN THE ATTACHED FILING REQUIREMENTS.**

\* For information about these questions, see the attached Statements Required by Laws and Executive Orders.

**Apply online at <https://disasterloan.sba.gov/ela/> OR send completed applications to:**

**U.S. Small Business Administration, Processing and Disbursement Center, 14925 Kingsport Road, Fort Worth, Texas 76155**

## 2. ORGANIZATION TYPE

- ☐ Sole Proprietorship ☐ Partnership ☐ Limited Partnership ☐ Limited Liability Entity
- ☐ Corporation ☐ Nonprofit Organization ☐ Trust ☐ Other: \_\_\_\_\_

## 3. APPLICANT'S LEGAL NAME

## 4. FEDERAL E.I.N. (if applicable)

## 5. TRADE NAME (if different from legal name)

## 6. BUSINESS PHONE NUMBER (including area code)

## 7. MAILING ADDRESS

☐ Business ☐ Home ☐ Temp ☐ Other \_\_\_\_\_

Number, Street, and/or Post Office Box

City

County

State

Zip

## 8. DAMAGED PROPERTY ADDRESS(ES)

(If you need more space, attach additional sheets.)

☐ Same as mailing address

## BUSINESS PROPERTY IS:

☐ Owned ☐ Leased

Number and Street Name

City

County

State

Zip

## 9. PROVIDE THE NAME(S) OF THE INDIVIDUAL(S) TO CONTACT FOR:

### Loss Verification Inspection

### Information necessary to process the Application

Name

Name

Telephone Number

Telephone Number

## 10. ALTERNATE WAY TO CONTACT YOU

☐ Cell Number

☐ E-mail

☐ Fax Number

☐ Other

## 11. BUSINESS ACTIVITY:

## 12. NUMBER OF EMPLOYEES (pre-disaster):

## 13. DATE BUSINESS ESTABLISHED:

## 14. CURRENT MANAGEMENT SINCE:

## 15. AMOUNT OF ESTIMATED LOSS:

If unknown, enter a question mark

☐ Real Estate

☐ Machinery & Equipment

☐ Inventory

☐ Leasehold Improvements

## 16. INSURANCE COVERAGE (IF ANY)

(If you need more space, attach additional sheets.)

Coverage Type:

Name of Insurance Company and Agent

Phone Number of Insurance Agent

Policy Number

<b>17. OWNERS</b> (Individuals and businesses.) (If you need more space attach additional sheets.)		Complete for each: 1) proprietor, or 2) limited partner who owns 20% or more interest and each general partner, or 3) stockholder or entity owning 20% or more voting stock.			
Legal Name		Title/Office	% Owned	E-mail Address	
SSN/EIN*	Marital Status	Date of Birth*	Place of Birth*	Telephone Number (area code)	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address		City	State	Zip	
Legal Name		Title/Office	% Owned	E-mail Address	
SSN/EIN*	Marital Status	Date of Birth*	Place of Birth*	Telephone Number (area code)	US Citizen <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing Address		City	State	Zip	
* For information about these questions, see the attached Statements Required by Laws and Executive Orders.					
Business Entity Owner Name		EIN	Type of Business	% Ownership	
Mailing Address		City	State	Zip Code	
E-mail Address			Phone		
<b>18. For the applicant business and each owner listed in item 17, please respond to the following questions, providing dates and details on any question answered YES (Attach an additional sheet for detailed responses).</b>					
a. Has the business or a listed owner ever been involved in a bankruptcy or insolvency proceeding? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
b. Does the business or a listed owner have any outstanding judgments, tax liens, or pending lawsuits against them? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
c. In the past year, has the business or a listed owner been convicted of a criminal offense committed during and in connection with a riot or civil disorder or other declared disaster, or ever been engaged in the production or distribution of any product or service that has been determined to be obscene by a court of competent jurisdiction? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
d. Has the business or a listed owner ever had or guaranteed a Federal loan or a Federally guaranteed loan? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
e. Is the business or a listed owner delinquent on any Federal taxes, direct or guaranteed Federal loans (SBA, FHA, VA, student, etc.), Federal contracts, Federal grants, or any child support payments? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
f. Does any owner, owner's spouse, or household member work for SBA or serve as a member of SBA's SCORE, ACE, or Advisory Council? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
g. Is the applicant or any listed owner currently suspended or debarred from contracting with the Federal government or receiving Federal grants or loans? .....				<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>19. Regarding you or any joint applicant listed in Item 17:</b>					
a) are you presently subject to an indictment, criminal information, arraignment, or other means by which formal criminal charges are brought in any jurisdiction; b) have you been arrested in the past six months for any criminal offense; c) for any criminal offense - other than a minor vehicle violation - have you ever: 1) been convicted, 2) plead guilty, 3) plead nolo contendere, 4) been placed on pretrial diversion, or 5) been placed on any form of parole or probation (including probation before judgement)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, Name: _____					
<b>20. PHYSICAL DAMAGE LOANS ONLY.</b> If your application is approved, you may be eligible for additional funds to cover the cost of mitigating measures (real property improvements or devices to minimize or protect against future damage from the same type of disaster event). It is not necessary for you to submit the description and cost estimates with the application. SBA must approve the mitigating measures before any loan increase. By checking this box, I am interested in having SBA consider this increase. <input type="checkbox"/>					
<b>21.</b> If anyone assisted you in completing this application, whether you pay a fee for this service or not, that person must print and sign their name in the space below.					
Name and Address of Representative (please include the individual name and their company)					
_____ (Signature of Individual)			_____ (Print Individual Name)		
_____ (Name of Company)			_____ Phone Number (include Area Code)		
_____ Street Address, City, State, Zip			_____ Fee Charged or Agreed Upon		
Unless the NO box is checked, I give permission for SBA to discuss any portion of this application with the representative listed above. NO <input type="checkbox"/>					
<b>AGREEMENTS AND CERTIFICATIONS</b>					
On behalf of the undersigned individually and for the applicant business:					
I/We authorize my/our insurance company, bank, financial institution, or other creditors to release to SBA all records and information necessary to process this application. If my/our loan is approved, additional information may be required prior to loan closing. I/We will be advised in writing what information will be required to obtain my/our loan funds. I/We hereby authorize the SBA to verify my/our past and present employment information and salary history as needed to process and service a disaster loan. I/We authorize SBA, as required by the Privacy Act, to release any information collected in connection with this application to Federal, state, local, tribal or nonprofit organizations (e.g. Red Cross, Salvation Army, Mennonite Disaster Services, SBA Resource Partners) for the purpose of assisting me with my/our SBA application, evaluating eligibility for additional assistance, or notifying me of the availability of such assistance. I/We will not exclude from participating in or deny the benefits of, or otherwise subject to discrimination under any program or activity for which I/we receive Federal financial assistance from SBA, any person on grounds of age, color, handicap, marital status, national origin, race, religion, or sex. I/We will report to the SBA Office of the Inspector General, Washington, DC 20416, any Federal employee who offers, in return for compensation of any kind, to help get this loan approved. I/We have not paid anyone connected with the Federal government for help in getting this loan.					
CERTIFICATION AS TO TRUTHFUL INFORMATION: By signing this application, you certify that all information in your application and submitted with your application is true and correct to the best of your knowledge, and that you will submit truthful information in the future.					
WARNING: Submitting false information to the Government can lead to criminal penalties and/or civil and administrative remedies against you. If you are prosecuted for submitting false information, you may be imprisoned for up to 30 years and/or fined up to \$250,000 under 18 U.S.C. § 1040 and other Federal statutes. The Government may also pursue a civil fraud case against you for three times the amount of your loan, and may exclude you from participating in Federal programs and contracts for submitting false information in-- or with -- your application or if you do not use the proceeds of the loan for the purpose(s) stated in your application and SBA's loan authorization.					
SIGNATURE	_____ Sign in Ink		TITLE	_____ DATE	

# Instructions for Completing the IRS Tax Authorization Form 4506-T

SBA requires you to complete the IRS Form 4506-T as a part of your disaster loan application submission. The form authorizes the IRS to provide federal income tax information directly to SBA. Although the form can be completed online, you must print and sign the form, then submit to SBA.

**The IRS Form 4506-T must be completed and submitted with each SBA disaster loan application, even if you are not required to file a federal income tax return.**

A separate IRS Form 4506-T must be returned with the SBA disaster loan application for:

- (1) each disaster loan applicant (individuals filing joint returns may use a single IRS Form 4506-T),
- (2) each corporation or partnership in which the disaster loan applicant holds a 50% or greater interest,
- (3) each individual or entity which holds a 20% or greater interest in the disaster loan applicant,
- (4) each general partner, and
- (5) each affiliate business.

**Where To Send Form 4506-T** (Include your full name and your Application Reference # on all correspondence submitted to the SBA.)

<p><b>Submit your completed document(s) to:</b> <b>Fax: 202-481-1505</b> <b>or</b> <b>E-mail: ELA.DOC@sba.gov</b></p>	<p><b>Mail to:</b> U.S. Small Business Administration Processing &amp; Disbursement Center Attn: ELA Mail Department P.O. Box 156119 Fort Worth, TX 76155</p>
---	---

- Fill in section 1-4, 6, 6b/c, 9, Attestation, Signature, Date and Title**
- Enter the name of the individual taxpayer, or business (whichever is applicable) that was used to file the tax return in section 1a. If you file a joint tax return, include the name of the joint filer that was used to file the tax return on line 2a.
- Next, enter the taxpayer identification number, i.e. Social Security number (SSN) in section 1b. If you file a joint tax return, include the SSN for the second filer in section 2b.
- If the authorization is for a business, enter the Employer Identification Number (EIN) in section 1b.
- Enter your current address in section 3. If name is different now than on the transcript being requested, enter the current name as well.
- Enter your previous address in section 4 only if different than the current address in section 3.
- Enter the tax transcript you filed in section 6. If this request is for an individual, enter 1040. If this request is for a business, please enter the business tax return you filed for the year (not quarterly returns). Examples might be 1065, 1120, 990, 1041, etc.
- For tax form 990 or 1041 check box 6b for all others check box 6c
- If the authorization is for an individual, include the 2 most recent years a tax return was filed. If the authorization is for a business, include the most recent 3 years a tax return was filed, including the end of the fiscal year of the business. Format is MM/DD/YYYY for all authorizations.
- Form 4506-T must be signed and dated by the taxpayer listed on line 1a or 2a (If you filed a joint tax return, only one filer is required to sign). You must check the box in the signature area to acknowledge you have the authority to sign and request the information. The form will not be processed and returned to you if the box is unchecked.
- Enter the telephone number of the first, or second filer in the signature area.
- Signer Title:** If the authorization is for a business, the signer must be authorized to request the tax transcript. Examples of authorized representatives of a business might be President, Secretary, Treasurer, Vice President, Chief Executive Officer, Chief Financial Officer, Owner, Managing Partner, General Partner, Limited Partner, Partner, Managing Member, or Trustee.

**Disaster**  
**Form 4506-T**  
**Request for Transcript of Tax Return**  
Department of the Treasury  
Internal Revenue Service  
September 2013  
OMB No. 1545-0047

OMB No. 1545-0047

\* Do not sign this form unless all applicable lines have been completed.  
\* Request may be rejected if the form is incomplete or illegible.  
\* For more information about Form 4506-T, visit [www.irs.gov/form4506](http://www.irs.gov/form4506).

Tip: Use Form 4506-T to order a transcript or other return information free of charge. See the product for details. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [irs.gov](http://irs.gov) and click on "Get a Tax Transcript," under "Tools" or call 1-800-829-1040. If you need a copy of your return, use Form 4506, Request for Copy of Tax Return. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions).
<b>2a</b> If a joint return, enter spouse's name shown on tax return.	<b>2b</b> Second social security number or individual taxpayer identification number if joint tax return.
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions).	
<b>4</b> Previous address shown on the last return filed if different from line 3 (see instructions).	
<b>5a</b> If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	
<b>5b</b> Customer file number (if applicable) (see instructions).	

**Caution:** If the tax transcript is being mailed to a third party, ensure that you have filed in lines 6 through 8 before signing. Sign and date the form once you have filed in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

**6** Transcript requested. Enter the tax form number here (1040, 1065, 9120, etc.) and check the appropriate box below. Enter only one tax form number per request.

<b>6a</b> Return Transcript, which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1041, Form 1120, Form 1120-A, Form 1120-B, Form 1120-L, and Form 1120-ES. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days.	<input type="checkbox"/>
<b>6b</b> Account Transcript, which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days.	<input type="checkbox"/>
<b>6c</b> Record of Account, which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days.	<input type="checkbox"/>
<b>7</b> Verification of Holding, which is proof from the IRS that you did not file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days.	<input type="checkbox"/>
<b>8</b> Form W-2, Form 1099 series, or Form 5498 series transcript. The IRS can provide a transcript that includes data from those information returns. State or local information is not included with that Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for recovery purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days.	<input type="checkbox"/>

**Caution:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9** Year or period requested. Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

<b>Signature of taxpayer(s)</b> (see instructions)	<b>Date</b>
<b>Sign Here</b>	
<b>Title</b> of line 1a above is a corporation, partnership, estate, or trust	
<b>Signature of taxpayer(s)</b>	<b>Date</b>

For Privacy Act and Paperwork Reduction Act Notice, see page 2. OMB No. 1545-0047 **Form 4506-T** (Rev. 9-2013)

**Disaster**  
**Request for Transcript of Tax Return**

- ▶ Do not sign this form unless all applicable lines have been completed.
- ▶ Request may be rejected if the form is incomplete or illegible.
- ▶ For more information about Form 4506-T, visit [www.irs.gov/form4506t](http://www.irs.gov/form4506t).

OMB No. 1545-1872

**Tip.** Use Form 4506-T to order a transcript or other return information free of charge. See the product list below. You can quickly request transcripts by using our automated self-help service tools. Please visit us at [IRS.gov](http://IRS.gov) and click on "Get a Tax Transcript..." under "Tools" or call 1-800-908-9946. If you need a copy of your return, use **Form 4506, Request for Copy of Tax Return**. There is a fee to get a copy of your return.

<b>1a</b> Name shown on tax return. If a joint return, enter the name shown first.	<b>1b</b> First social security number on tax return, individual taxpayer identification number, or employer identification number (see instructions)
<b>2a</b> If a joint return, enter spouse's name shown on tax return.	<b>2b</b> Second social security number or individual taxpayer identification number if joint tax return
<b>3</b> Current name, address (including apt., room, or suite no.), city, state, and ZIP code (see instructions)	
<b>4</b> Previous address shown on the last return filed if different from line 3 (see instructions)	
<b>5a</b> If the transcript or tax information is to be mailed to a third party (such as a mortgage company), enter the third party's name, address, and telephone number.	

**U.S. Small Business Administration Office of Disaster Assistance**

**5b** Customer file number (if applicable) (see instructions)

**Caution:** If the tax transcript is being mailed to a third party, ensure that you have filled in lines 6 through 9 before signing. Sign and date the form once you have filled in these lines. Completing these steps helps to protect your privacy. Once the IRS discloses your tax transcript to the third party listed on line 5, the IRS has no control over what the third party does with the information. If you would like to limit the third party's authority to disclose your transcript information, you can specify this limitation in your written agreement with the third party.

**6 Transcript requested.** Enter the tax form number here (1040, 1065, 1120, etc.) and check the appropriate box below. Enter only one tax form number per request. ▶

<b>a Return Transcript</b> , which includes most of the line items of a tax return as filed with the IRS. A tax return transcript does not reflect changes made to the account after the return is processed. Transcripts are only available for the following returns: Form 1040 series, Form 1065, Form 1120, Form 1120-A, Form 1120-H, Form 1120-L, and Form 1120S. Return transcripts are available for the current year and returns processed during the prior 3 processing years. Most requests will be processed within 10 business days . . . . .	<input type="checkbox"/>
<b>b Account Transcript</b> , which contains information on the financial status of the account, such as payments made on the account, penalty assessments, and adjustments made by you or the IRS after the return was filed. Return information is limited to items such as tax liability and estimated tax payments. Account transcripts are available for most returns. Most requests will be processed within 10 business days . . . . .	<input type="checkbox"/>
<b>c Record of Account</b> , which provides the most detailed information as it is a combination of the Return Transcript and the Account Transcript. Available for current year and 3 prior tax years. Most requests will be processed within 10 business days . . . . .	<input checked="" type="checkbox"/>
<b>7 Verification of Nonfiling</b> , which is proof from the IRS that you <b>did not</b> file a return for the year. Current year requests are only available after June 15th. There are no availability restrictions on prior year requests. Most requests will be processed within 10 business days . . . . .	<input type="checkbox"/>
<b>8 Form W-2, Form 1099 series, Form 1098 series, or Form 5498 series transcript.</b> The IRS can provide a transcript that includes data from these information returns. State or local information is not included with the Form W-2 information. The IRS may be able to provide this transcript information for up to 10 years. Information for the current year is generally not available until the year after it is filed with the IRS. For example, W-2 information for 2011, filed in 2012, will likely not be available from the IRS until 2013. If you need W-2 information for retirement purposes, you should contact the Social Security Administration at 1-800-772-1213. Most requests will be processed within 10 business days . . . . .	<input type="checkbox"/>

**Caution:** If you need a copy of Form W-2 or Form 1099, you should first contact the payer. To get a copy of the Form W-2 or Form 1099 filed with your return, you must use Form 4506 and request a copy of your return, which includes all attachments.

**9 Year or period requested.** Enter the ending date of the year or period, using the mm/dd/yyyy format. If you are requesting more than four years or periods, you must attach another Form 4506-T. For requests relating to quarterly tax returns, such as Form 941, you must enter each quarter or tax period separately.

12 / 31 / 2018	12 / 31 / 2017	12 / 31 / 2016	/ /
----------------	----------------	----------------	-----

**Caution:** Do not sign this form unless all applicable lines have been completed.

**Signature of taxpayer(s).** I declare that I am either the taxpayer whose name is shown on line 1a or 2a, or a person authorized to obtain the tax information requested. If the request applies to a joint return, at least one spouse must sign. If signed by a corporate officer, 1 percent or more shareholder, partner, managing member, guardian, tax matters partner, executor, receiver, administrator, trustee, or party other than the taxpayer, I certify that I have the authority to execute Form 4506-T on behalf of the taxpayer. **Note:** This form must be received by IRS within 120 days of the signature date.

<input type="checkbox"/> <b>Signatory attests that he/she has read the attestation clause and upon so reading declares that he/she has the authority to sign the Form 4506-T.</b> See instructions.	Phone number of taxpayer on line 1a or 2a
<div style="display: flex; justify-content: space-between;"><div>▶ <b>Signature</b> (see instructions)</div><div>Date</div></div>	
<div style="display: flex; justify-content: space-between;"><div>▶ <b>Title</b> (if line 1a above is a corporation, partnership, estate, or trust)</div><div></div></div>	
<div style="display: flex; justify-content: space-between;"><div>▶ <b>Spouse's signature</b></div><div>Date</div></div>	



### SUGGESTED FORMAT

## SCHEDULE OF LIABILITIES

(Notes, Mortgages and Accounts Payable)

[illegible]

This form is provided for your convenience in responding to filing requirements in Item 2 on the application, SBA Form 5. You may use your own form if you prefer. The information contained in this schedule is a supplement to your balance sheet and should balance to the liabilities presented on that form.





OMB APPROVAL NO.: 3245-0188  
EXPIRATION DATE: 01/31/2018

## PERSONAL FINANCIAL STATEMENT

### 8(a) Business Development Program

U.S. SMALL BUSINESS ADMINISTRATION

As of \_\_\_\_\_, \_\_\_\_\_

Each individual claiming economic disadvantage must submit personal financial information. When married, an individual claiming economic disadvantage must submit separate financial information for his or her spouse, unless the individual and the spouse are legally separated. Additionally, any proprietor; partner; member of a limited liability company (LLC); or owner of 10% or more of the equity of the business MUST complete this form and return to the appropriate SBA Office of Certification and Eligibility at <http://www.sba.gov/8abd> or send a hard copy with paper application to one of the two following locations:

Mail to the following address, if your firm is located in MA, ME, NH, CT, VT, RI, NY, PR (Puerto Rico), VI (US Virgin Islands), NJ, PA, MD, VA, WV, DC, DE, GA, AL, NC, SC, MS, FL, KY, TN

US Small Business Administration  
DPCE Central Office Duty Station  
Parkview Towers  
1150 First Avenue  
10th Floor, Suite 1001  
King of Prussia, PA 19406

Mail to the following address, if your firm is located in IL, OH, MI, IN, MN, WI, TX, NM, AR, LA, OK, MO, IA, NE, KS, CO, WY, ND, MT, UT, SD, CA, HI, GU (GUAM), NV, AZ, WA, AK, ID, OR

US Small Business Administration  
Division of Program Certification and Eligibility  
455 Market Street, 6th Floor  
San Francisco, CA 94105

See <http://www.sba.gov/8abd>. Note: Please complete this form with Personal Information not Business information.

<b>Name</b>		<b>Business Phone</b>	
<b>Home Address</b>		<b>Home Phone</b>	
<b>City, State, &amp; Zip Code</b>			
<b>Business Name of Applicant/Borrower</b>			
<b>ASSETS</b> (Omit Cents)		<b>LIABILITIES</b> (Omit Cents)	
Cash on Hand & in banks.....\$ _____		Accounts Payable.....\$ _____	
Savings Accounts.....\$ _____		Notes Payable to Banks and Others.....\$ _____ (Describe in Section 2)	
IRA or Other Retirement Account.....\$ _____ (Describe in Section 4)		Installment Account (Auto).....\$ _____ Mo. Payments \$ _____	
Roth.....\$ _____ (Describe in Section 4)		Installment Account (Other).....\$ _____ Mo. Payments \$ _____	
Accounts & Notes Receivable.....\$ _____ (Describe in Section 5)		Loan(s) Against Life Insurance.....\$ _____	
Life Insurance – Cash Surrender Value Only.....\$ _____ (Describe in Section 8)		Mortgages on Real Estate.....\$ _____ (Describe in Section 4)	
Stocks and Bonds.....\$ _____ (Describe in Section 3)		Unpaid Taxes.....\$ _____ (Describe in Section 6)	
Real Estate.....\$ _____ (Describe in Section 4)		Other Liabilities.....\$ _____ (Describe in Section 7)	
Automobiles.....\$ _____ (Describe in Section 5, and include Year/Make/Model)		Total Liabilities.....\$ 0	
Other Personal Property.....\$ _____ i.e. Such as boat, jewelry, etc. (Describe in Section 5)		Net Worth.....\$ 0	
Other Assets.....\$ _____ (Describe in Section 5)		<b>Total Liabilities &amp; Net Worth \$ 0</b> *Must equal total in assets column.	
Mutual Funds (Describe in Section 3)			
Applicant's Business Equity.....\$ _____			
Equity in other firms.....\$ _____			
<b>Total Assets \$ 0</b>			
<b>Section 1. Source of Income.</b>		<b>Contingent Liabilities</b>	
Salary.....\$ _____		As Endorser or Co-Maker.....\$ _____	
Net Investment Income.....\$ _____		Legal Claims & Judgments.....\$ _____	
Real Estate Income.....\$ _____		Provision for Federal Income Tax.....\$ _____	
Other Income (Describe below)*.....\$ _____		Other Special Debt.....\$ _____	

\*Alimony or child support payments should not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.

**Description of Other Income in Section 1.**

**Section 2. Notes Payable to Banks and Others.** (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Names and Addresses of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endorsed Type of Collateral

**Section 3. Stocks, Bonds and Mutual Funds.** (Use attachments if necessary. Each attachment must be identified as part of this statement and signed.)

Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

**Section 4. Real Estate Owned.** (List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)

	Property A-Primary Residence	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.) (If jointly owned, please explain)			
Address			
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year			
Status of Mortgage			

**Section 5. Other Personal Property and Other Assets.** (Describe, and, if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and, if delinquent, describe delinquency.)

**Section 6. Unpaid Taxes.** (Describe in detail as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

**Section 7. Other Liabilities.** (Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and "Current" cash surrender value of policies – name of insurance company; Beneficiaries.)

I authorize the SBA to make inquiries as necessary to verify the accuracy of the statements. **CERTIFICATION:** (to be completed by person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA will rely on this information when making decisions regarding an application for participation in the SBA 8(a) Business Development (BD) Program.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_

Social Security No. \_\_\_\_\_

**NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BD PROGRAM: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS**

Any person who misrepresents a business concern's status as an 8(a) BD Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) subject to treble damages and civil penalties under the False Claims Act, 31 U.S.C. 3729; (4) subject to administrative remedies, including suspension and debarment; and (5) ineligible for participation in programs conducted under the authority of the Small Business Act.

**PLEASE NOTE:** The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance officer, paper Reduction Project (3245-0188), Office of Management and Budget, Washington, D.C. 20503. PLEASE DO NOT SEND FORMS TO OMB.

## **PLEASE READ, DETACH, AND RETAIN FOR YOUR RECORDS**

### **STATEMENTS REQUIRED BY LAW AND EXECUTIVE ORDER**

#### **Privacy Act (5 U.S.C. 552a)**

Any person can request to see or get copies of any personal information that SBA has in his or her file when that file is retrieved by individual identifiers such as name or social security numbers. Requests for information about another party may be denied unless SBA has the written permission of the individual to release the information to the requestor or unless the information is subject to disclosure under the Freedom of Information Act.

Under the provisions of the Privacy Act, you are not required to provide your social security number. Failure to provide your social security number may not affect any right, benefit or privilege to which you are entitled. Disclosures of name and other personal identifiers are, however, required for a benefit, as SBA requires an individual seeking assistance from SBA to provide it with sufficient information for it to make a character determination. In determining whether an individual is of good character, SBA considers the person's integrity, candor, and disposition toward criminal actions. For all forms of assistance SBA is authorized to make all investigations necessary to ensure that a person has not engaged in acts that violate or will violate the Act or the Small Business Investment Act, 15 USC Sections 634(b)(11) and 687(b)(a), respectively. For these purposes, you are asked to voluntarily provide your social security number to assist SBA in making a character determination and to distinguish you from other individuals with the same or similar name or other personal identifier.

The Privacy Act authorizes SBA to make certain "routine uses" of information protected by that Act. One such routine use is the disclosure of information maintained in SBA's investigative files system of records when this information indicates a violation or potential violation of law, whether civil, criminal, or administrative in nature. Specifically, SBA may refer the information to the appropriate agency, whether Federal, State, local or foreign, charged with responsibility for, or otherwise involved in investigation, prosecution, enforcement or prevention of such violations. Another routine use is disclosure to other Federal agencies conducting background checks; only to the extent the information is relevant to the requesting agencies' function. See, 74 F.R. 14890 (2009), and as amended from time to time for additional background and other routine uses.

**Freedom of Information Act (5 U.S.C. 552)** -- This law provides, with some exceptions, that SBA must supply information reflected in agency files and records to a person requesting it. Information about approved loans that will be automatically released includes, among other things, statistics on our loan programs (individual borrowers are not identified in the statistics) and other information such as the names of the borrowers (and their officers, directors, stockholders or partners), the collateral pledged to secure the loan, the amount of the loan, its purpose in general terms and the maturity. Proprietary data on a borrower would not routinely be made available to third parties. All requests under this Act are to be addressed to the nearest SBA office and be identified as a Freedom of Information request.

#### **Executive Order 12549, Debarment and Suspension (13 C.F.R. 145)**

The prospective lower tier participant certifies, by submission of the application for program participation (or participant's annual update) that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. Where the prospective lower tier participant ( or active participant ) is unable to certify to any of the statements in this certification, such participants shall attach an explanation.



It can be helpful to provide a financial forecast to illustrate what the income and expenses for the business will be during the period affected by the disaster until normal operations resume. This is not required.

This optional format is provided for your convenience.

Period covered by this forecast. From	To
Net sales (receipts)	
Less cost of goods sold	
Gross profit	
Less expenses	
Officers salaries	
Employee wages	
Advertising	
Rent	
Utilities	
Interest	
Taxes	
Insurance	
Other expenses	
Total expenses	
Net profit <Loss> before income taxes	

PLEASE SUBMIT ANY ADDITIONAL NARRATIVE OR FINANCIAL INFORMATION  
YOU FEEL WILL HELP ESTABLISH YOUR ECONOMIC LOSS

---

Please note: The estimated burden for completing this form is 1 hour. You are not required to respond to any collection of information unless it displays a current valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration; Chief, AIB; 409 3rd St., SW, Washington, DC 20416 and Desk Officer for the Small Business Administration; Office of Management and Budget, New Executive Office Building, Room 10202, Washington, DC 20503. OMB Approval (3245-0017). Please do not send forms to OMB.